

Health Subcommittee Reviews Legislation

Tuesday, March 03 2009

WASHINGTON, DC – Today, the House Veterans Affairs Health Subcommittee, led by Chairman Michael Michaud (D-ME), held a hearing to review legislation to improve and expand the health care delivery and services for veterans provided by the Department of Veterans Affairs (VA).

WASHINGTON, DC – Today, the House Veterans Affairs Health Subcommittee, led by Chairman Michael Michaud (D-ME), held a hearing to review legislation to improve and expand the health care delivery and services for veterans provided by the Department of Veterans Affairs (VA).

“Today’s legislative hearing is an opportunity for Members of Congress, veterans, the VA and other interested parties to provide their views on and discuss recently-introduced legislation within the Subcommittee’s jurisdiction,” said Chairman Michaud. “The legislation before the Subcommittee today covers a wide range of important issues including mental health, women veterans, and reimbursement for emergency care treatment in non-VA facilities.”

The Health Subcommittee hearing reviewed the following three bills, along with draft legislation related to emergency care services for veterans:

H.R. 784, To direct the Secretary of Veterans Affairs to submit to Congress quarterly reports on vacancies in mental health professional positions in Department of Veterans Affairs medical facilities; (Tsongas D-MA-5). This bill directs the Secretary to report quarterly to Congress describing any vacancy in a mental health professional position at any VA medical facility, including psychiatrists, psychologists, social workers, marriage and family therapists, and licensed professional mental health counselors.

Congresswoman Tsongas testified, “H.R. 784 simply requires the VA to report vacancies in mental health professional positions at VA facilities on a quarterly basis. With the significant influx of OEF and OIF [Operation Enduring Freedom and Operation Iraqi Freedom] veterans facing mental health wounds, as well as the already existing veterans populations from earlier generations receiving care at the VA, it is incumbent upon us to make sure that we have the necessary staffing to provide care.”

H.R. 785, To direct the Secretary of Veterans Affairs to carry out a pilot program to provide outreach and training to certain college and university mental health centers relating to the mental health of veterans of Operation Iraqi Freedom and Operation Enduring Freedom, and for other purposes; (Tsongas D-MA-5). This bill directs the Secretary to carry out a four-year pilot program to provide covered outreach and training services on the mental health of Operations Enduring and Iraqi Freedom veterans to covered mental health centers, which include counseling centers, student health or wellness centers, or student services centers at colleges or universities with large enrollments of such veterans. The outreach and training services for covered mental health centers include training for clinicians on treatment for common mental illnesses and training on assisting veterans in accessing VA mental health care and services, among other programs.

Congresswoman Tsongas explained the purpose of H.R. 785 is to “provide college counselors and other staff who come in close contact with student-veterans at their schools with the tools to recognize symptoms of combat related mental health wounds; the ability to appropriately assist a student-veteran in need; and an understanding of how to effectively refer that student-veteran to the VA for care. I believe my legislation will actually augment the VA’s continuum of care and bring in veterans who may be hesitant or apprehensive about seeking care from the VA.”

H.R. 1211, Women Veterans Health Care Improvement Act; (Herseth-Sandlin D-SD). This bill directs the VA to conduct a study on the barriers faced by women veterans in accessing care in the VA health care system and to conduct a

comprehensive assessment of the women's health care programs at each VA medical center. The assessment will include reporting the demographics of women veterans population, the frequency with which health care services are available and provided for women veterans, and the impact of waiting lists, geographic distance, and other factors in obstructing the receipt of services. The bill would provide VA medical care for newborn children of women veterans receiving maternity care for a period of 14 days beginning on the day the child is born.

Congresswoman Herseth Sandlin testified, "More women are answering the call to serve, and more women veterans need access to services that they are entitled to when they return. With increasing numbers of women now serving in uniform, the challenge of providing adequate health care services for women veterans is overwhelming. With more women seeking access to care, and for a more diverse range of medical conditions, in the future, these needs will likely be even significantly greater. Clearly, we must do everything we can from a public policy standpoint to meet this new challenge of women veterans."

Draft Discussion, To amend title 38, United States Code, to expand veteran eligibility for reimbursement by the Secretary of Veterans Affairs for emergency treatment furnished in a non-Department facility, and for other purposes; (Filner D-CA-51). This bill would expand veteran eligibility to require the VA to pay for emergency treatment for a non-service connected condition if a third party is not responsible for paying for the full cost of care. The bill clarifies that the VA only pay the difference between the amounts paid by the third party and the VA allowable amount, and is not responsible for copayments the veteran owes to the third party.

Bob Filner, Chairman of the House Committee on Veterans' Affairs, offered the following statement: "Under current law, the VA does not pay for emergency treatment for non-service connected conditions in non-VA facilities if a veteran has third party insurance that pays either full or a portion of the emergency care. This includes veterans who carry an auto insurance policy providing minimal health care coverage. I plan to introduce legislation to clarify the reimbursement responsibilities of the VA, so veterans can focus on their recovery, instead of being overburdened with financial concerns."

The bills must be approved by the Health Subcommittee and the Full House Committee on Veterans' Affairs before being considered by the House of Representatives.

Witness List:

Panel 1

Honorable Niki Tsongas, Massachusetts, Member, U.S. House of Representatives

Honorable Stephanie Herseth Sandlin, South Dakota, Member, U.S. House of Representatives

Panel 2

Joy J. Ilem, Assistant National Legislative Director, Disabled American Veterans

Joseph L. Wilson, Deputy Director, Veterans Affairs and Rehabilitation Commission, The American Legion

Eric Hilleman, Deputy Director, National Legislative Service. Veterans of Foreign Wars

Todd Bowers, Director of Government Affairs, Iraq and Afghanistan Veterans of America

Panel 3

Gerald M. Cross, M.D., FAPP, Principal Deputy Under Secretary for Health, U.S. Department of Veterans Affairs

Accompanied by

Walter A. Hall, Assistant General Counsel, U.S. Department of Veterans Affairs

Prepared testimony and a link to the webcast is available on the internet at this link:
<http://veterans.house.gov/hearings/hearing.aspx?newsid=347>.

#